

***The Over Identification of Minority Males in Middle School Special Education Programs:
Examining the RTI Model***

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Abstract

The purpose of this paper is to provide insight into the referral and identification rates of minority students with regard to special education. Research has shown an evident over identification of minority students in special education programs, particularly those classifications considered more severe. Several researchers identified factors such as teacher perception, teacher practices, and student factors that all contribute to the disproportionality of minority students in special education. Response to Intervention has been identified as a possible solution. Many indicate that specific schools that have implemented RTI have noticed a decrease in the disparity in the referral rate of the racial subgroups. An overview of the RTI model frequently used by these schools was reviewed, and the specific effect on the referral rate of minority students to special education was also discussed. This paper also highlights recommendations and considerations for educational leaders who wish to resolve the issue of minority over identification in special education.

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“Nationally, African American students show up in certain special education categories in numbers that so exceed their proportion in the general education population. Some experts are calling it a crisis” (Milloy, 2003). Additionally, African American males are referred to special education more frequently than their white counterparts (NEA, 2007). The higher frequency of special education referrals, assessment, and placement has caused concern about the issue of minority male over identification in special education.

On average, minority males, specifically African American males, are three times more likely to be referred to special education than any other sub group in a school setting (National Research Council, 2002). Although many researchers say that minorities are being over identified in special education, there are disproportionately low numbers of minorities being referred to Gifted and Talented programs. Gifted and Talented programs fall under the special education umbrella because it provides a special program to the Gifted and Talented population (Anguiano, 2003). The largely disproportionate numbers of African American males referred to special education has caused people to pay attention and advocate for change (Abidan, 2002).

As recent as 2001, African Americans made up more than 59 percent of students labeled as Mentally Retarded and 44 percent of the students diagnosed as Emotional Behavioral, even though they only made up 23 percent of the student body in an Alabama middle school (Milloy, 2003). Similar patterns of over representation are found across the nation (NEA, 2007).

Racial disparity in special education is an issue because educators need to ensure that educational decisions are made equitably. Students should be placed in the least restrictive environment (Harris-Murri, King, & Rostenberg, 2006). The use of an RTI model is encouraged in order to support this practice. After implementing RTI, several schools have noticed a marked decline in the number of special education referrals, and an increase in the number of students that are successful with general education classroom interventions (Naglieri and Crockett, 2005). This suggests that a comprehensive implementation of the RTI process may provide the solution. This paper will explore this possibility.

Student Assessment and the Referral Process

Student Assessment, which includes the administration of standardized tests, use of anecdotal reports, as well as, a variety of other assessment strategies, can be seen by some as culturally inappropriate (Anguiano, 2003). However, these are the methods used by educators to assess a child for the special education program. The discrepancy analysis has most frequency been used to identify children with Specified Learning Disabilities (Dykeman, 2005).

When considering the use of a tool for assessment purposes, it is important to consider the norm group with which it was originally administered (Clopton et al, 1993). If the assessment is biased against the group that it is being used for then that is discriminatory toward the student that is taking the test. Further, if a teacher offers anecdotal notes as an assessment tool in the special education referral process, then these measures may be biased as well. According to the Metropolitan Center for Urban Education, children of color are often seen as “disrespectful” by teachers when within the parameters of their culture, they are not intentionally being disrespectful at all (MetroPolitan Center for Urban Education, 2008). The perception toward these students becomes skewed depending on the teacher’s perceptions of the child and their cultural group, and their judgments about that particular group’s ability (Ladson-Billings, 2002). Therefore, anecdotal notes are frequently an unreliable source of data that is frequently used during the special education referral process.

“The *Individuals with Disabilities Education Act* (IDEA) 2004 requests evaluators to consider the contribution of one’s culture and primary language upon one’s test performance, prior opportunities to acquire skills, motivation to perform, as well as the contribution of any hearing or vision impairment upon such performance” (Dykeman, 2005).

Many of the high-stakes tests that are administered to minority students contain language to which these students have not been exposed. Again, the norm group used to create these assessment tools may have been comprised of children that are very different than the students actually being tested. The use of scores obtained from these assessments may be problematic because they do not accurately reflect the child’s ability, but only report the child’s performance on the specific test which was taken. This is only a single negative consequence of high-stakes/standardized testing (Christensen et al., 2004). The assessment process is not “fool-proof”, and there have been efforts to improve it, but not much progress has been made (Naquin, et al., 2003).

The assessment process is being looked at as a factor in the racial disparity that exists in special education. The aspects of the assessment process that are biased result in a high number of African American males being referred for suspected disabilities, and coincidentally, a large number of minority students being kept out of the Gifted and Talented education programs, which is also a special program for children with exceptionalities (CDE, 2008).

While a variety of assessment strategies are used in the RTI model, the most frequently used are functional assessments, authentic assessments, curriculum-based assessments, and play-based assessments. Utilizing these modes of assessment can serve as a pre-intervention strategy in itself. (Stoiber, 2006). The educator assessing the student, or receiving the assessment information, can then obtain detailed information as to the students' area of weakness. This concentrates the efforts to intervene successfully with a students' deficits.

Special Education Categories

Students who are assessed for special education, and receives an eligibility, can fall into one or more of 11 different categories. According to IDEIA 2004, a student may either be diagnosed as having developmental disabilities, mental retardation, specific learning disabilities, speech or language impairments, emotional disturbances, orthopedic impairments, autism, traumatic brain injury, or other health impairments.

In order to consider a child for special education, the child must display characteristics typical of a child within the specific category, but must also perform significantly lower than his peers on other academic assessments. The child must fit the criteria for the diagnosis and be in need of additional academic support. (IDEIA, 2008).

The Issue of Minority "Over Identification": Contributing Factors

Teacher Perceptions

The researchers in online books and other resources generally believe that teacher perceptions of student demographics play a major role in the decision to refer (McIntyre & Tong, 1998).

Teacher perception of minority students is a complex issue to address and explore. This is primarily difficult to explore because the research gathered is vastly subjective. Clopton et al. (1993) states, "the reason for such incompatible findings may be related to the methodology of studies." For example, many times anecdotal and vignettes are frequently used and both can be considered an unreliable source. The number of minority male students referred, then placed into special education programs have been consistently disproportionate. "Researchers have investigated the impact of a student's race on teachers' judgments. The findings regarding the influence of race on the referral process have slightly varied" (Abidan & Robinson, 2002). Within this slight variance there still exists a noticeable problem with regard to the rate at which minority males are labeled as "special needs."

Many investigators have supported the argument that not only are African American students found to be referred to special education more, but are also diagnosed with more severe forms of disabilities (i.e. Educable Mental Retardation, Emotional Behavioral Disorder) more frequently

than white special education students with comparable IQ and achievement scores. (Milloy, 2003).

Other researchers found no significant difference in the number of white or non-white students referred to special education (Kohler et al., 2006). During a recent research endeavor, Nancy Hariss-Murri and colleagues found that teachers not only tend to misinterpret minority students' behaviors, but also administer culturally biased assessments that produce false results (Harris-Murri, King & Rostenberg, 2006). Some teachers also perceive the white student as more capable of grasping the concepts taught than minorities. As a result the white students are offered more encouragement and more opportunities within the school setting. This biased attitude typically leads teachers to be hesitant to refer the white child to special education (Ross & Salvia, 1975).

Racial bias has affected teachers' views of behavior, judgment of performance, and the individualization of instruction. Teachers that belong to the dominant group have frequently referred to minorities as deviant or inferior (Lorde, 1983; Ladson-Billings, 2002; MCUE, 2008).

In *The Skin that We Speak*, by Gloria Ladson-Billings (2002), the concept of "permission to fail" is introduced. As a result of teachers' perception of minority students as incapable or unwilling to perform many of the tasks assigned them, some teachers have inadvertently given their students the option to fail. While doing field research, Ladson-Billings (2002) further explains that she "witnessed several teachers give their minority students 'permission to fail' each day." They seemed to make it easy for the child to refuse to try a task or refuse to make corrections to an assignment. Secondly, Ladson-Billings noted that the white students in the class got more direct instruction and more frequent encouragement (both verbal and non-verbal) to keep trying until they were successful.

Cultural Behavioral Norms

A secondary factor that may impact the over identification of minority males in special education is the cultural behavioral expectations for minorities. What is considered normal to students in this group does not usually meet the norms of the dominant group. Many minority students are frequently judged by teachers based on existing norms for the middle class, white child. Teacher beliefs about themselves and their perceptions of students have been linked to a number of teacher behaviors and judgments about students, including the decision to refer to special education (Abidan & Robinson, 2002).

Researchers have found that teachers have seemed to interpret students' behaviors differently (MCUE, 2008). Their judgment of this behavior and their stress level associated with the judgment will be impacted by their perception of the particular student (Pianta et al., 1995). Generally, these researchers found that the teachers involved in this particular study experienced the most distress with minority students who had behavioral issues because they perceived the behavior as particularly abnormal. The deviance that is normally described by teachers in their special education referrals for emotional and behavioral concerns is a subjective report of what the teacher considers deviant behavior, and their reaction to it.

“Street corner behavior”, which may be considered as normal by some minority student (Foster, 1986), may be perceived by many educators as deviant or disruptive. Many general education teachers report that they do not feel adequately trained to work with students from a variety of cultural backgrounds (Thompson, 2004).

Teacher Experience & Training: The factor of individualized instruction

As a result of desegregation, educators have been faced with the challenge of providing instruction that effectively reaches both minority and non-minority students. Frequently, it is found that many instructors are ineffective at instructing minority students, and as a result, these students frequently fail to acquire the basic skills and concepts necessary to be successful. (Kozleski, 2005). When individualized instruction is not provided for students, educators run the risk of having some students remain unsuccessful. Unfortunately, many educators do not see the connection between the academic failure of minority students and their method of instruction. (Thompson, 2004). Some educators do not feel that the students will benefit from a different teaching strategy/approach, or from a few basic interventions. It is frequently the case that educators tend to resolve academic or behavioral concerns with minority students by referring these students to special education for services. (McIntyre & Tong, 1998).

McIntyre and Tong (1998) tout that the most integral factor in the student referral to special education and the disparities that occur within this realm can be most greatly impacted by what occurs between the student and teacher in the classroom. What occurs during this exchange impacts students’ achievement; and resultantly a teacher’s decision to refer a child to special education. Pianta, Rollins & Steinberg (2005) also agree that an individualized instructional strategy, particularly for minority students who may live in a different social context than which occur in school, is imperative. According to the National Education Association, “teachers must be equipped with strategies to teach diverse students. Teachers must also be made aware of cultural nuances and given tools to intervene early in the life of an at-risk minority child. Then the likelihood is increases that these kids will succeed, without the need for a referral to the special education program.” (Milloy, 2003).

Teachers must give more individualized instruction in their daily classroom lesson delivery. They may not use simple interventions such as teacher proximity or problem reduction to reach hard-to-reach students, but must now offer more specific interventions. (Milloy, 2003). Teachers can no longer try basic interventions, and then refer a child to special education, which had been previous practice (Dykeman, 2005). Through the new practice, teachers must now offer more; more intervention and opportunity. This process of providing students with more interventions and allowing time for the student to respond to the intervention is the underlying notion for Response to Interventions (RTI). (Naglieri and Crockett, 2005). While the decision to create such a strategy had been made on a federal level, it was an actual school system that piloted the innovation. Putting this concept into action was first accomplished by the district offices of Lee County in Alabama (National Research Council, 2002). “Many consider this an unlikely leader in the effort to reform the special education referral process. Alabama’s effort to make special education referrals racially equitable is surprising to many leaders in education because Alabama has been considered a source of racial strife for years (Milloy, 2003).” Whether it be that the change was initiated by this district because of internal disparities, or if the

efforts were an attempt to remain leaders in innovation for schools, it is still important to note what Alabama has put into effect to diminish problems of racial disparity.

What is Response to Intervention (RTI)

“Advocates and activists have been instrumental in the quest for equity in American schools. Their collective, organized efforts have produced” positive results for students (Kozleski & Smith, 2005). These advocates and activists have used the data found in previous studies to work toward change.

One change that has been implemented by IDEIA 2004 is the Response-to-Intervention (RTI) assessment model. The RTI model was developed to replace the “wait to fail” model currently in practice in schools. The use of the RTI approach suggests that more responsibility should be placed on regular education teachers. The expectation of RTI is that all students will receive quality education, research-based interventions and timely identifications of disabilities (Harris-Murri, King & Rostenberg, 2006).

When utilizing the RTI model, teachers do not wait for the child to fail in order to refer them to special education. Instead, a series of interventions are implemented in the classroom, and if unsuccessful, a referral may occur. (Harris-Murri, King, & Rostenberg, 2006).

Assessment Strategies, Interventions, and Implementation

Additionally, the RTI model discusses the use of alternative assessment strategies when diagnosing a child for special education. (Dykeman, 2005). Traditionally, the discrepancy model is used to determine if a student may need special education services. However, the RTI model encourages the use of multiple assessment strategies, including authentic assessment, play-based assessment, functional assessment, and curriculum-based measurement.

Naglieri and Crockett (2005) summarize that most schools that use the RTI model, use a multi-tiered approach when making the decision to refer a child to special education. While the specific number of tiers used or the order of the activities may vary, most schools have an approach that has a minimum of three tiers. One sample school in Ohio, which will be discussed further in this paper, uses a four-tiered approach to the RTI model. At tier one, teachers and parents work together to mediate an academic or behavioral problem; tier two involves the recommendation of interventions by a building-level assistance team; tier three calls for refining and redesigning the interventions; and tier four is the point at which a special education referral is made. Some RTI models may include the review of standardized assessment data, and some may include a more informal report of baseline data. RTI does not mandate this or any other form of pre-assessment. RTI does, however, request that a series of interventions be implemented before any referral is made. (Harris-Murri, King, & Rostenberg, 2006).

The RTI model should be seen as a pre-referral intervention strategy that will successfully identify strategies that meet the child’s specific academic needs. This model should occur in the general education setting and should be put into place prior to any special education decision.

(Naglieri and Crockett, 2005). Through the RTI model educators are also provided with documented data that is useful when a special education decision is to be made.

Findings

Since the introduction of RTI, teachers have begun to receive training that will allow them to offer a more varied approach to their instructional delivery. (Harris-Murri, King, & Rostenberg, 2006). Additionally, teachers are provided a support network to consult with regarding challenging students, research-based interventions, and cultural sensitivity training. Schools that have implemented the RTI model successfully, hold teachers accountable for the referrals that they make to special education. (Dykeman, 2005). Schools have reported a noticeable decline in the number of referrals to special education, which they attribute to the implementation of RTI (Cawelti, 2004).

According to RTI researchers O'Shaughnessy, Lane, Gresham & Beebe-Frankenberger (2003), Response to Intervention may be considered one of the most effective methods of remedying the minority over identification issue. This success has occurred partly because teachers largely have a positive perception toward the additional training and support. Specifically, teachers tend to view the additional training and support as resources, rather than intrusive. Teachers have responded positively to the changes by committing to the extra planning, training, following through with implementing the new practices, and initiating their own practices to support RTI (O'Shaughnessy, et al., 2003). In addition to their positive response, teachers implement the interventions in the classroom because they realize that they are being held accountable (Milloy, 2003).

In a study conducted by Milloy in 2003, there was evidence that an Alabama school was effective in implementing the RTI model. There was evidence that the number of minority students referred to and placed in special education programs was greatly declined post RTI implementation. Milloy found that by training teachers to provide interventions, and by requiring teachers to document student progress, there was a significant decline in minority referrals/placement in special education. In this school, the students identified as mentally retarded declined from 59 percent to 40 percent after the use of the RTI model. Those considered EBD were reduced to 30 percent, a decline from the 44 percent previously reported.

Other researchers indicate that the effectiveness of RTI cannot be truly determined, but seem favorable. Naglieri and Crockett (2005) support the use of RTI and argue that it "makes good sense at the pre-referral phase". Conversely, another researcher indicates that he has not found any significant evidence that suggest RTI is an effective means of assessment and encumber teachers within the building with providing additional and unnecessary documentation and interventions to students who need specialized support (Fuchs, 2003). In support of Fuchs argument, Naglieri and Crockett agree that RTI has worked for some schools, but should not be used as the sole means of determining a child's eligibility.

Conclusion

The paper examines the effectiveness of the RTI model in reducing the number of minority males referred to special education. Some of the key factors that influence a teacher to refer a minority male were reviewed. RTI key terms and special education categories were also reviewed. Some researchers argued that the RTI method was the most effective intervention strategy and served to greatly reduce the number of minority males who were over identified (Milloy, 2003; Naglieri and Crockett, 2005). On the other hand, some researchers disagreed; arguing that the RTI method has many challenges (Fuchs, 2003; Harris-Murri, King & Rostenberg, 2006).

Educational leaders must note that several schools have adopted the model and revised the model to fit their school's needs. This individualization of the RTI model has led to the use of different formats between schools. Resultantly, this creates an issue when comparing schools for effectiveness of this model, since each may be developed and implemented differently. Future research is needed to truly determine RTI's effectiveness. A comparison of two or more schools with similar RTI models would need to be reviewed to gain a more accurate depiction of this model's effectiveness in reducing disparity among the racial demographic groups comprising special education referrals.

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About the Author

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